Company, ...

Company Tracking Number: PA AR00069CGR01

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Tiering

Project Name/Number: /PA AR00069CGR01

Filing at a Glance

Companies: Metropolitan Property and Casualty Insurance Company, Metropolitan Casualty Insurance Company

Product Name: Tiering SERFF Tr Num: METX-125940654 State: Arkansas

TOI: 19.0 Personal Auto SERFF Status: Closed State Tr Num: EFT \$100

Sub-TOI: 19.0001 Private Passenger Auto Co Tr Num: PA AR00069CGR01 State Status: Fees verified and

(PPA) received

Filing Type: Rate Co Status: Reviewer(s): Alexa Grissom, Betty

Montesi

Author: Richard Collard Disposition Date: 12/11/2008

Date Submitted: 12/10/2008 Disposition Status: Filed

Effective Date Requested (New): 02/01/2009 Effective Date (New): 02/01/2009

Effective Date Requested (Renewal): Effective Date (Renewal):

State Filing Description:

General Information

Project Name: Status of Filing in Domicile:
Project Number: PA AR00069CGR01 Domicile Status Comments:

Reference Organization: Reference Number:

Reference Title: Advisory Org. Circular:

Filing Status Changed: 12/11/2008

State Status Changed: 12/11/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Arkansas Auto MetP&C and MetCas rate revision. Please refer to the filing introduction for details.

Company and Contact

Filing Contact Information

Jacqueline Hattoy, Sr. State Filing Specialist jhattory@metlife.com

 $Company, \dots$

Company Tracking Number: PA AR00069CGR01

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Tiering

Project Name/Number: /PA AR00069CGR01

700 Quaker Lane (401) 827-2949 [Phone] Warwick, RI 02887 (401) 827-3929[FAX]

Filing Company Information

Metropolitan Property and Casualty Insurance CoCode: 26298 State of Domicile: Rhode Island

Company

700 Quaker Lane Group Code: 241 Company Type: Property and

Casualty

Warwick, RI 02887 Group Name: Metropolitan Property State ID Number:

and Casualty Insurance Company

(401) 827-2000 ext. [Phone] FEIN Number: 13-2725441

Metropolitan Casualty Insurance Company CoCode: 40169 State of Domicile: Rhode Island

700 Quaker Lane Group Code: 241 Company Type: Property and

Casualty

Warwick, RI 02887 Group Name: Metropolitan Property State ID Number:

and Casualty Insurance Company

(401) 827-2000 ext. [Phone] FEIN Number: 05-0393243

Company, ...

Company Tracking Number: PA AR00069CGR01

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Tiering

Project Name/Number: /PA AR00069CGR01

Filing Fees

Fee Required? Yes

Fee Amount: \$100.00

Retaliatory? No

Fee Explanation:

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Metropolitan Casualty Insurance Company \$0.00 12/10/2008

Metropolitan Property and Casualty Insurance \$100.00 12/10/2008 24452587

Company

 SERFF Tracking Number:
 METX-125940654
 State:
 Arkansas

 First Filing Company:
 Metropolitan Property and Casualty Insurance
 State Tracking Number:
 EFT \$100

 $Company, \dots$

Company Tracking Number: PA AR00069CGR01

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Tiering

Project Name/Number: /PA AR00069CGR01

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Alexa Grissom	12/11/2008	12/11/2008

 SERFF Tracking Number:
 METX-125940654
 State:
 Arkansas

 First Filing Company:
 Metropolitan Property and Casualty Insurance Company, ...
 State Tracking Number:
 EFT \$100

Company Tracking Number: PA AR00069CGR01

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Tiering

Project Name/Number: /PA AR00069CGR01

Disposition

Disposition Date: 12/11/2008

Effective Date (New): 02/01/2009

Effective Date (Renewal):

Status: Filed Comment:

Company Name:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):	Overall % Indicated Change:
Metropolitan Property and Casualty Insurance Company	0.000%	\$0	0	\$2,746,458	%	%	%
Metropolitan Casualty Insurance Company	0.000%	\$0	0	\$18,003	%	%	%

Overall Rate Information for Multiple Company Filings
Overall Percentage Rate Indicated For This Filing
Overall Percentage Rate Impact For This Filing

Effect of Rate Filing-Written Premium Change For This Program \$0

Effect of Rate Filing - Number of Policyholders Affected

0.000%

0.000%

0

 SERFF Tracking Number:
 METX-125940654
 State:
 Arkansas

 First Filing Company:
 Metropolitan Property and Casualty Insurance
 State Tracking Number:
 EFT \$100

 $Company, \dots$

Company Tracking Number: PA AR00069CGR01

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Tiering

Project Name/Number: /PA AR00069CGR01

Item Type	Item Name	Item Status	Public Access
Supporting Document	A-1 Private Passenger Auto Abstract	Filed	Yes
Supporting Document	APCS-Auto Premium Comparison Survey	/ Filed	Yes
Supporting Document	NAIC loss cost data entry document	Filed	Yes
Supporting Document	NAIC Loss Cost Filing Document for OTHER than Workers' Comp	Filed	Yes
Supporting Document	Uniform Transmittal Document-Property Casualty	&Filed	Yes
Supporting Document	Filing Introduction	Filed	Yes
Rate	Rate Pages	Filed	Yes

 SERFF Tracking Number:
 METX-125940654
 State:
 Arkansas

 First Filing Company:
 Metropolitan Property and Casualty Insurance Company, ...
 State Tracking Number:
 EFT \$100

Company Tracking Number: PA AR00069CGR01

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Tiering

Project Name/Number: /PA AR00069CGR01

Rate Information

Rate data applies to filing.

File and Use

Rate Change Type: Neutral

Overall Percentage of Last Rate Revision: 2.000%

Effective Date of Last Rate Revision: 11/30/2008

Filing Method of Last Filing: File and Use

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for	# of Policy Holders Affected for this	Premium:	Maximum % Change (where required):	Minimum % Change (where required):
			this	Program:			
			Program:				
Metropolitan Property and Casualty Insurance	%	0.000%	\$0	0	\$2,746,458	%	%
Company							
Metropolitan Casualty Insurance Company	%	0.000%	\$0	0	\$18,003	%	%

Overall Rate Information for Multiple Company Filings

Overall % Rate Indicated: 0.000%

Overall Percentage Rate Impact For This Filing: 0.000%

SERFF Tracking Number: METX-125940654 State: Arkansas First Filing Company: EFT \$100 Metropolitan Property and Casualty Insurance Company, ... State Tracking Number: Company Tracking Number: PA AR00069CGR01 TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA) Product Name: Tiering Project Name/Number: /PA AR00069CGR01

Effect of Rate Filing - Written Premium Change For This Program:

Effect of Rate Filing - Number of Policyholders Affected:

0

 $Company, \dots$

Company Tracking Number: PA AR00069CGR01

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Tiering

Project Name/Number: /PA AR00069CGR01

Rate/Rule Schedule

Review Status: Exhibit Name: Rule # or Page Rate Action Previous State Filing Attachments

Number:

Filed Rate Pages Pages 30-31 Replacement Pages 30-31.PDF

Metropolitan Property and Casualty Insurance Company Metropolitan Casualty Insurance Company

Arkansas Private Passenger Automobile

Tier Assignment Rules - New Business

	> 100/300 or CSL > 300	One 0	Two 0	Three +
7e	Time with prior carrier	· ·	· ·	· ·
76	< 3 years	0	0	0
	>= 3 years and < 6 years	0	0	0
	>= 6 years and < 10 years	-1	-1	-1
	>= 10 years and < 16 years	-2	-2	-2
	>= 16 years	-2	-2	-2
7 f	Prior or current BI limits (lower of either) >= 100/300 or CSL >= 300 AND No operators under age 25; homeowner (home or condo); no minor violations, license suspensions, or at-fault accidents in the past 3 years; and no major violations in the past 5 years			
	PFM Score Level BD - DW	-2	-2	-2
	PFM Score Level ED - EW	-4	-4	-4
	PFM Score Level FD - FW	-2	-2	-2
	PFM Score Level GD - GT	-1	-1	-1
	OR No operators under age 25; homeowner (home or condo); and at least 1 chargeable accident or minor violation in the past 3 years, or at least 1 major violations in the past 5 years			
	PFM Score Level BD - DW	0	0	0
	PFM Score Level ED - EW	-1	-1	-1
	<u>OR</u>			
	All operators under age 25 and renter	-2	-2	-2
7g	Time with prior carrier >= 10 years			
•	PFM Score Level DD - DW	-1	-1	-1
	PFM Score Level ED - FW	-2	-2	-2
8	If prior insurance with no lapse in coverage, future effective date			
	> 3 days and <= 7days	0	0	0
	> 7 days	-1	-1	-1
9	Non-rated operator under age 22	9	9	9
	Non-rated operator age 22-29	2	2	2
10a.	If Personal Financial Management (PFM) is:			
	PFM Score Level			
	BD	-17	-17	-17
	BH	-15	-15	-15
	BL	-13	-13	-13
	BP	-11	-11	-11
	BT	-10	-10	-10
	BW	-9	-9	-9
	CD	-9	-9	-9
	CH	-8	-8	-8
	CL	-8	-8 -	-8
	CP	-7	-7	-7 -
	CT CW	-7 -7	-7 -7	-7 -7
	CW	-7 C	-7 C	-7 C
	DD	-6	-6	-6 C
	DG	-6 6	-6 6	-6 6
	DJ	-6	-6	-6

Printed: February 2009 Rate Page 30

Metropolitan Property and Casualty Insurance Company Metropolitan Casualty Insurance Company

Arkansas Private Passenger Automobile

Tier Assignment Rules - New Business

		One	Two	Three +
	DN	-5	-5	-5
	DQ	-5	-5	-5
	DT	-4	-4	-4
	DW	-4	-4	-4
	ED	-1	-1	-1
	EG	0	0	0
	EJ	0	0	0
	EN	1	1	1
	EQ	2	2	2
	ET	4	4	4
	EW	4	4	4
	FD	5	5	5
	FG	7	7	7
	FJ	8	8	8
	FN	9	9	9
	FQ	11	11	11
	FT	12	12	12
	FW	13	13	13
	GD	14	14	14
	GH	15	15	15
	GL	17	17	17
	GP	18	18	18
	GT	19	19	19
	HD	20	20	20
	HH	21	21	21
	HL	22	22	22
	HP	24	24	24
	HT	27	27	27
	HW	33	33	33
	NF	6	6	6
	NK	8	8	8
	NN	8	8	8
	NQ	8	8	8
	TTQC	O	Ü	Ü
10b	No operators under age 25 and PFM Score Level BD - BW	-1	-1	-1
10c	Presence of an operator under age 21 and			
	PFM Score Level BD	4	4	4
	PFM Score Level BH	3	3	3
	PFM Score Level BL	2	2	2
	PFM Score Level BP	2	2	2
	PFM Score Level BT	2	2	2
	PFM Score Level BW	1	1	1
11	Payment Plan			
• •	1 Pay	0	0	0
	2 Pay	0	0	0
	2 Fdy	U	U	U
12a	Prior non-standard or AIP	2	2	2
12b	Prior non-standard or AIP and minimum F/R limits	3	3	3
13	Operator licensed <3 years where no vehicle assigned to youth	2	3	3
14	All operators licensed < 3 years	3	5	6
. 4	7 iii oporatoro nooriood 🧸 o yodro	3	3	U

Printed: February 2009 Rate Page 31

Company, ...

Company Tracking Number: PA AR00069CGR01

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Tiering

Project Name/Number: /PA AR00069CGR01

Supporting Document Schedules

Review Status:

Bypassed -Name: A-1 Private Passenger Auto Filed 12/11/2008

Abstract

Bypass Reason: n/a

Comments:

Review Status:

Satisfied -Name: APCS-Auto Premium Comparison Filed 12/11/2008

Survey

Comments:

The excel versions of these APCS forms are being e-mailed to Alexa Grissom.

Attachments:

MPC - APCS.PDF MCAS - APCS.PDF

Review Status:

Satisfied -Name: NAIC loss cost data entry document Filed 12/11/2008

Comments: Attachment:

RF-1 Rate Filing Abstract.PDF

Review Status:

Bypassed -Name: NAIC Loss Cost Filing Document Filed 12/11/2008

for OTHER than Workers' Comp

Bypass Reason: n/a

Comments:

Review Status:

Satisfied -Name: Uniform Transmittal Document- Filed 12/11/2008

Property & Casualty

Comments:

Attachment:

Created by SERFF on 12/11/2008 03:35 PM

SERFF Tracking Number: METX-125940654 State: Arkansas Metropolitan Property and Casualty Insurance State Tracking Number:

First Filing Company:

EFT \$100

 $Company, \dots$

Company Tracking Number: PA AR00069CGR01

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Tiering

/PA AR00069CGR01 Project Name/Number:

AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF

SERFF Tracking Number: METX-125940654 State: Arkansas

First Filing Company: Metropolitan Property and Casualty Insurance State Tracking Number: EFT \$100

 $Company, \dots$

Company Tracking Number: PA AR00069CGR01

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Tiering

Project Name/Number: /PA AR00069CGR01

Review Status:

Satisfied -Name: Filing Introduction Filed 12/11/2008

Comments:

Attachment:

Filing Introduction.PDF

Private Passenger Auto Premium Comparision Survey Form

FORM APCS - last modified August 2005

NAIC Number: Company Name:

Metropolitan Property and Casualty Insurance Company

Contact Person: Richard E. Collard Telephone No.: 1-800-257-5049

Email Address: rcollard@metlife.com

Effective Date: 11/30/08 NB and 01/04/09 RB

DISCOUNTS OFFERED: PASSIVE RESTRAINT/AIRBAG AUTO/HOMEOWNERS GOOD STUDENT ANTI-THEFT DEVICE Over 55 Defensive Driver Discount

\$250/\$500 Deductible Comp./Coll.

20-40	%
10	%
5-25	%
5-10	%
10	%
25 40	0/

Assumptions to Use:

1 Liability -Minimum \$25,000 per person

2 Bodily Injury \$50,000 per accident \$25,000 per accident

- 3 Property Damage \$100 deductible per accident
- 4 Comprehensive & Collision \$250 deductible per accident
- 5 The insured has elected to accept: Uninsured motorist property and bodily injury equal to liability coverage
 Underinsured bodily injury equal to liability coverage
 6 Personal Injury Protection of \$5,000 for medical, loss
- wages according to statute and \$5,000 accidental
- 7 If male and female rates are different, use the highest of the two

Submit to:

Arkansas Insurance Department 1200 West Third Street Little Rock. AR 72201-1904

501-371-2800 Telephone:

Email as an attachment <u>insurance.pnc@arkansas.gov</u> You may also attach to a SERFF filing or submit on a compact disk

										Little Rock					(III		Pine Bluff				
			Fay	etteville Male or	Male or		Trur	mann Male or	Male or		Male or Male or				Lake \	/illage Male or	Male or		Pine	Bluff Male or	Male or
	Gender	Female	Male	Female	Female	Female	Male	Female	Female	Female	Male	Female	Female	Female	Male	Female	Female	Female	Male	Female	Female
Vehicle	Coverages Age	18	18	40	66	18	18	40	66	18	18	40	66	18	18	40	66	18	18	40	66
	Minimum Liability	\$1,141	\$1,383	\$499	\$521	\$1,542	\$1,876	\$679	\$706	\$1,609	\$1,958	\$712	\$735	\$1,361	\$1,652	\$597	\$620	\$1,371	\$1,665	\$605	\$628
1999 Chevrolet Silverado 1500 2WD "LS" regular cab 119" WB	Minimum Liability with Comprehensive and Collision	\$2,629	\$3,032	\$1,039	\$1,041	\$3,331	\$3,865	\$1,336	\$1,334	\$3,190	\$3,711	\$1,269	\$1,277	\$3,204	\$3,701	\$1,268	\$1,264	\$3,370	\$3,892	\$1,336	\$1,328
	100/300/50 Liability with Comprehensive and Collision	\$2,935	\$3,407	\$1,174	\$1,184	\$3,742	\$4,370	\$1,515	\$1,521	\$3,631	\$4,251	\$1,463	\$1,478	\$3,604	\$4,194	\$1,445	\$1,447	\$3,775	\$4,391	\$1,515	\$1,515
	Minimum Liability	\$1,141	\$1,383	\$499	\$521	\$1,542	\$1,876	\$679	\$706	\$1,609	\$1,958	\$712	\$735	\$1,361	\$1,652	\$597	\$620	\$1,371	\$1,665	\$605	\$628
2003 Ford Explorer 'XLT' 2WD, 4 door	Minimum Liability with Comprehensive and Collision	\$3,218	\$3,687	\$1,246	\$1,238	\$4,046	\$4,661	\$1,585	\$1,578	\$3,832	\$4,417	\$1,490	\$1,490	\$3,943	\$4,518	\$1,525	\$1,515	\$4,167	\$4,774	\$1,617	\$1,597
	100/300/50 Liability with Comprehensive and Collision	\$3,524	\$4,062	\$1,381	\$1,381	\$4,458	\$5,166	\$1,765	\$1,765	\$4,272	\$4,957	\$1,683	\$1,691	\$4,343	\$5,012	\$1,702	\$1,698	\$4,573	\$5,273	\$1,796	\$1,784
	Minimum Liability	\$1,141	\$1,383	\$499	\$521	\$1,542	\$1,876	\$679	\$706	\$1,609	\$1,958	\$712	\$735	\$1,361	\$1,652	\$597	\$620	\$1,371	\$1,665	\$605	\$628
2003 Honda Odyssey "EX"	Minimum Liability with Comprehensive and Collision	\$3,145	\$3,606	\$1,219	\$1,213	\$3,966	\$4,569	\$1,556	\$1,548	\$3,765	\$4,345	\$1,464	\$1,464	\$3,847	\$4,413	\$1,492	\$1,480	\$4,079	\$4,674	\$1,578	\$1,568
	100/300/50 Liability with Comprehensive and Collision	\$3,452	\$3,980	\$1,353	\$1,355	\$4,378	\$5,074	\$1,736	\$1,736	\$4,206	\$4,885	\$1,658	\$1,665	\$4,247	\$4,906	\$1,669	\$1,663	\$4,485	\$5,173	\$1,757	\$1,755
	Minimum Liability	\$1,141	\$1,383	\$499	\$521	\$1,542	\$1,876	\$679	\$706	\$1,609	\$1,958	\$712	\$735	\$1,361	\$1,652	\$597	\$620	\$1,371	\$1,665	\$605	\$628
2005 Toyota Camry LE 3.0L 4 door Sedan	Minimum Liability with Comprehensive and Collision	\$3,785	\$4,321	\$1,453	\$1,435	\$4,735	\$5,427	\$1,839	\$1,819	\$4,438	\$5,091	\$1,702	\$1,695	\$4,647	\$5,306	\$1,782	\$1,761	\$4,939	\$5,634	\$1,895	\$1,866
	100/300/50 Liability with Comprehensive and Collision	\$4,091	\$4,696	\$1,587	\$1,578	\$5,146	\$5,932	\$2,018	\$2,007	\$4,879	\$5,632	\$1,895	\$1,895	\$5,047	\$5,799	\$1,960	\$1,944	\$5,345	\$6,133	\$2,075	\$2,053
	Minimum Liability	\$1,141	\$1,383	\$499	\$521	\$1,542	\$1,876	\$679	\$706	\$1,609	\$1,958	\$712	\$735	\$1,361	\$1,652	\$597	\$620	\$1,371	\$1,665	\$605	\$628
2003 Cadillac Seville "STS" 4 door Sedan	Minimum Liability with Comprehensive and Collision	\$3,896	\$4,446	\$1,503	\$1,482	\$4,883	\$5,597	\$1,909	\$1,878	\$4,526	\$5,193	\$1,743	\$1,732	\$4,785	\$5,462	\$1,847	\$1,815	\$5,093	\$5,813	\$1,968	\$1,932
	100/300/50 Liability with Comprehensive and Collision	\$4,202	\$4,820	\$1,638	\$1,624	\$5,294	\$6,102	\$2,088	\$2,065	\$4,967	\$5,733	\$1,936	\$1,932	\$5,185	\$5,955	\$2,024	\$1,999	\$5,499	\$6,312	\$2,147	\$2,120
	Minimum Liability	\$1,141	\$1,383	\$499	\$521	\$1,542	\$1,876	\$679	\$706	\$1,609	\$1,958	\$712	\$735	\$1,361	\$1,652	\$597	\$620	\$1,371	\$1,665	\$605	\$628
1998 Chevrolet Cavalier LS 4D Sedan	Minimum Liability with Comprehensive and Collision	\$2,759	\$3,180	\$1,092	\$1,088	\$3,508	\$4,068	\$1,410	\$1,400	\$3,317	\$3,853	\$1,320	\$1,320	\$3,366	\$3,884	\$1,334	\$1,324	\$3,557	\$4,105	\$1,412	\$1,400
	100/300/50 Liability with Comprehensive and Collision	\$3,065	\$3,555	\$1,227	\$1,230	\$3,920	\$4,573	\$1,589	\$1,587	\$3,758	\$4,393	\$1,513	\$1,521	\$3,765	\$4,378	\$1,511	\$1,507	\$3,962	\$4,604	\$1,591	\$1,587

Private Passenger Auto Premium Comparision Survey Form

FORM APCS - last modified August 2005

NAIC Number: 40169 Company Name: Metrpolitan Casualty Insurance Company Contact Person: Richard E. Collard Telephone No.: 1-800-257-5049

Email Address: rcollard@metlife.com Effective Date: 11/30/08 NB and 01/04/09 RB

DISCOUNTS OFFERED: PASSIVE RESTRAINT/AIRBAG AUTO/HOMEOWNERS GOOD STUDENT ANTI-THEFT DEVICE Over 55 Defensive Driver Discount

\$250/\$500 Deductible Comp./Coll.

20-40	%
10	%
5-25	%
5-10	%
10	%
35,40	%

Assumptions to Use:

1 Liability -Minimum \$25,000 per person 2 Bodily Injury \$50,000 per accident

\$25,000 per accident

- 3 Property Damage \$100 deductible per accident
- 4 Comprehensive & Collision \$250 deductible per accident
- 5 The insured has elected to accept: Uninsured motorist property and bodily injury equal to liability coverage
 Underinsured bodily injury equal to liability coverage
 6 Personal Injury Protection of \$5,000 for medical, loss
- wages according to statute and \$5,000 accidental
- 7 If male and female rates are different, use the highest of the two

Submit to: Arkansas Insurance Department

1200 West Third Street Little Rock. AR 72201-1904

501-371-2800 Telephone:

Email as an attachment insurance.pnc@arkansas.gov You may also attach to a SERFF filing or submit on a compact disk

φ200/φ000 Deductible	Deductible Comp./Coll. 35																					
				Fay	etteville			Tru	mann		Little Rock					Lake	Village		Pine Bluff			
		Gender	Female	Male	Male or Female	Male or Female	Female	Male	Male or Female	Male or Female	Female	Male or Male or Female Male Female Fe			Female	Male	Male or Female	Male or Female	Female	Male	Male or Female	Male or Female
Vehicle	Coverages	Age	18	18	40	66	18	18	40	66	18	18	40	66	18	18	40	66	18	18	40	66
	Minimum Liabil	lity	\$0	\$1,246	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
1999 Chevrolet Silverado 1500 2WD "LS" regular cab 119" WB	Comprehensive Collision	e and	\$0	\$2,732	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	100/300/50 Liai Comprehensive Collision		\$0	\$3,067	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Minimum Liabil	lity	\$0	\$1,246	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2003 Ford Explorer 'XLT' 2WD, 4 door	Minimum Liabil Comprehensive Collision	and	\$0	\$3,321	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	100/300/50 Liai Comprehensive Collision		\$0	\$3,656	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Minimum Liabil	lity	\$0	\$1,246	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2003 Honda Odyssey "EX"	Minimum Liabil Comprehensive Collision	e and	\$0	\$3,249	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	100/300/50 Liai Comprehensive Collision		%	\$3,584	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Minimum Liabil	lity	%	\$1,246	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2005 Toyota Camry LE 3.0L 4 door Sedan	Minimum Liabil Comprehensive Collision		%	\$3,890	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	100/300/50 Liai Comprehensive Collision		%	\$4,226	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Minimum Liabil		%	\$1,246	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2003 Cadillac Seville "STS" 4 door Sedan	Minimum Liabil Comprehensive Collision	and	%	\$4,003	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	100/300/50 Liai Comprehensive Collision		\$0	\$4,339	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Minimum Liabil		\$0	\$1,246	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
1998 Chevrolet Cavalier LS 4D Sedan	Minimum Liabil Comprehensive Collision	and	Male	\$2,867	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	100/300/50 Liai Comprehensive Collision		\$18	\$3,202	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

FORM RF-1 Rate Filing Abstract NAIC LOSS COST DATA ENTRY DOCUMENT

1.	Thi	s filing transmittal is part of Company Tracking #		
2.		ling is an adoption of an advisory organization loss cost filing, give name Advisory Organization and Reference/ Item Filing Number		
		Company Name		Company NAIC Number
3.	A.	Metropolitan Property and Casualty Insurance Company	B.	241-26298

			Product Coding Matrix Line of Business (i.e., Type of Insurance)		Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)
4.	Δ	۸.	19.0 Personal Auto	B.	19.0001 Private Passenger Auto (PPA)

5.

					FOR LOSS COSTS	ONLY	
(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
Bodily Injury	N/A	0.0					
Property Damage	N/A	0.0					
UM/IUM	N/A	0.0					
UMPD	N/A	0.0					
Medical Payments	N/A	0.0					
Personal Injury Protection	N/A	0.0					
Comprehensive	N/A	0.0					
Collision	N/A	0.0					
Towing	N/A	0.0					
TOTAL OVERALL EFFECT	N/A	0.0					

6.	5 Year History	Rate Change History	
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Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2004	665	0.0	7/15/2004	845	267	31.5%	58.3%
2005	994	-3.1	3/31/2005	1,152	596	51.7%	52.6%
2005	994	-3.7	7/30/2005	1,152	596	51.7%	52.6%
2006	1,573	0.0	7/30/2006	1,932	1,161	60.0%	44.9%
2007	1,964	4.5	3/15/2008	2,712	1,629	60.0%	50.3%
2007	1,964	2.0	11/30/2008	2,712	1,629	60.0%	50.3%

Expense Constants	Selected Provisions
Total Production Expense	N/A

A. Total Production Expense	N/A
B. General Expense	N/A
C. Taxes, License & Fees	N/A
D. Underwriting Profit	
& Contingencies	N/A
E. Other (explain)	
F. TOTAL	N/A

3.	N/A	Apply Lost Cost Factors to Future filings?	(Y or N)
----	-----	--	----------

9.	0.0	Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable):	
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PC RLC INS01783

^{10. 0.0} Estimated Maximum Rate Decrease for any Insured (%). Territory (if applicable):

FORM RF-1 Rate Filing Abstract NAIC LOSS COST DATA ENTRY DOCUMENT

1.	This filing transmittal is part of Company Tracking #	
	If filing is an adoption of an advisory organization loss cost filing, give name	
۷.	of Advisory Organization and Reference/ Item Filing Number	

Company Name		Company NAIC Number			
3.	A.	Metropolitan Casualty Insurance Company	B.	241-40169	

		Product Coding Matrix Line of Business (i.e., Type of Insurance)		Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)
4.	A.	19.0 Personal Auto	B.	19.0001 Private Passenger Auto (PPA)

5.

(4)					FOR LOSS COSTS	ONLY	
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
COVERAGE (See Instructions)	Indicated % Rate Level Change	Requested % Rate Level Change	Expected Loss Ratio	Loss Cost Modification Factor	Selected Loss Cost Multiplier	Expense Constant (If Applicable)	Co. Current Loss Cost Multiplier
Bodily Injury	N/A	0.0					
Property Damage	N/A	0.0					
UM/IUM	N/A	0.0					
UMPD	N/A	0.0					
Medical Payments	N/A	0.0					
Personal Injury Protection	N/A	0.0					
Comprehensive	N/A	0.0					
Collision	N/A	0.0					
Towing	N/A	0.0					
TOTAL OVERALL EFFECT	N/A	0.0					

6.	5 Year History	Rate Change History				
				State Farned	Incurred	

Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2004	31	0.0	7/15/2004	35	40	114.2%	58.1%
2005	22	-3.1	3/31/2005	21	0	0.0%	58.7%
2005	22	-3.7	7/30/2005	21	0	0.0%	58.7%
2006	24	0	7/30/2006	20	4	20.0%	53.5%
2007	21	4.5	3/15/2008	20	7	35.0%	56.1%
2007	21	2.0	11/30/2008	20	7	35.0%	56.1%

1.	
Expense Constants	Selected Provisions
A. Total Production Expense	N/A
B. General Expense	N/A
C. Taxes, License & Fees	N/A
D. Underwriting Profit	
& Contingencies	N/A
E. Other (explain)	
F. TOTAL	N/A

₹ .	N/A	Apply Lost Cost Factors to Future filings?	(Y or N)
<i>,</i> .	1 1/ 1 1	ripply Look Goot I doloro to I didio Illingo:	(1 01 11)

9.	N/A	Estimated Maximum Rate Increas	e for any Ir	nsured (%).	Territory (i	f applicable)

		, ,	, , ,	
10.	N/A	Estimated Maximum Rate Decrease for any Insured (%).	Territory (if applicable):	

PC RLC INS01783

Property & Casualty Transmittal Document

	Reserved for Insurance I			artment Us	e only			
				ne filing is received:				
		b. Analyst						
	c. Disposition:							
		d. Date of	disposit	ion of the fili	ing:			
		e. Effectiv						
		I	New Bus					
		F	Renewal	Business				
		f. State F	f. State Filing #:					
		g. SERFF	g. SERFF Filing #:					
		h. Subject	t Codes					
				•				
3.	Group Name						Group NAIC #	
	Metropolitan Property and C	asualty Insurance Co	ompany				241	
4.	Company Name(s)			Domicile	NAIC #	FEIN #	State #	
	Metropolitan Property and C	asualty Insurance						
	Company			RI	26298	13-272	5441	
	Metropolitan Casualty Insura	ance Company		RI	40169	05-039	3243	
		. ,						
5.	Company Tracking Numbe	er PA AR	R00069C	GR01				
Conto	ct Info of Filer(s) or Corpora	oto Officar(a) linglad	lo toll fro	o numborl				
6.	Name and address	Title		phone #s	FAX	#	e-mail	
			10.0					
		Sr. State Filing						
	Jacqueline A. Hattoy Specialist					-3a2a	jhattory@metlife.com	
	Jacqueline A. Hattoy	Specialist	800-2	257-5049	401-827	0020	j. iaitor y & mountotom	
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7.	700 Quaker Lane Warwick RI 02887 Signature of authorized file	er	Jecq	quelin a. Has	Hoy	3323	,	
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PC TD-1 pg 1 of 2 INS02026

Property & Casualty Transmittal Document

20.	This filing transmittal is part of Company Tracking # PA AR00069CGR01
21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

Arkansas Auto MetP&C and MetCas rate revision. Please refer to the filing introduction for details.

22.	Filing Fees (Filer must provide check # and fee amount if applicable.)
	[If a state requires you to show how you calculated your filing fees, place that calculation below]
	Check #: Amount:

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

PC TD-1 pg 2 of 2

^{***}Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

METROPOLITAN PROPERTY & CASUALTY INSURANCE COMPANY METROPOLITAN CASUALTY INSURANCE COMPANY

Arkansas Automobile Rule Revision

Introduction

The automobile rates currently in use by Metropolitan Property & Casualty Insurance Company and Metropolitan Casualty Insurance Company were filed with the Arkansas Insurance Department, effective November 30, 2008 for new business and January 4, 2009 for renewal business.

At this time Metropolitan Property & Casualty Insurance Company and Metropolitan Casualty Insurance Company are proposing the following change:

Tier Assignment Rule 10a – New Business

Tier assignment points have been revised for PFM score levels BD-DW.